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ETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)			Docket Number (Opti	onal) 020964-000210U
(Fees pursuant to the Consolid	FY 2005 lated Appropriations Act, 2	2005 (H.R. 4818).)		
Application Number 09/895,478			Filed June 29, 2001	
For IMPROVED SURFACE MO	OUNT PACKAGE			
Art Unit 2813	Unit 2813		Examiner Jennifer M. Dolan	
This is a request under the provi application.	sions of 37 CFR 1.136	6(a) to extend the pe	riod for filing a reply in	the above identified
The requested extension and fe	e are as follows (checl	k time period desired	and enter the approp	oriate fee below):
		<u>Fee</u>	Small Entity Fed	<u>e</u> ,
One month (37 CF	R 1.17(a)(1))	\$120	\$60	\$
Two months (37 C	FR 1.17(a)(2))	\$450	\$225	\$
Three months (37	CFR 1.17(a)(3))	\$1020	\$510	\$_1020
Four months (37 C		\$1590	\$795	\$
Five months (37 C		\$2160	\$1080	\$
Applicant claims small ent	itv status. See 37 CF	R 1.27.		
A check in the amount of				
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☐ Payment by credit card. F  The Director has already!				
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The Director is hereby aut Deposit Account Number			equired, or credit any closed a duplicate cop	
WARNING: Information on th	is form may become pub	lic. Credit card informa	•	•
Provide credit card informati	on and authorization on l	PTO-2038.		
Lam tha Danstinant	. P			
I am the applicant	/inventor.			
	of record of the entire ement under 37 CFR 3			
<b>5</b>		•	•	
Δ attorney	or agent of record. Re	egistration Number _	39,496	
	or agent under 37 CFI tration number if acting u			
Negis	tradion number if acting to	inder 37 CFR 1.34	···	-
	$\rightarrow$ $<$	$\sim$	Octobe	r 25, 2005
	Signature	· · · · · · · · · · · · · · · · · · ·		Date
Kent J. Tr	obin, Reg. No. 39,496		650-3	26-2400
Typed or printed name		Telephone Number		
OTE: Signatures of all the inventors or a	scianoes of record of the	iro interest or their reserve	ptotivo(a) are a suite d. O. I	amit multiple fa 'S '
ore: Signatures of all the inventors of all the signature is required, see below.	saignees or record of the ent	ne interest or their represe	mauve(s) are required. Sul	omit multiple forms if more tha
Total of	forms are s	ubmitted.		